

REQUEST FOR QUOTATION (THIS IS NOT AN ORDER)			THIS RFQ <input checked="" type="checkbox"/> IS <input type="checkbox"/> IS NOT A SMALL BUSINESS SET ASIDE			PAGE 1 OF 1 PAGES				
1. REQUEST NO. AG-4756-S-12-0007		2. DATE ISSUED 12/09/2011		3. REQUISITION/PURCHASE REQUEST NO. 566979		4. CERT. FOR NAT. DEF. UNDER BDSA REG. 2 AND/OR DMS REG.1		RATING		
5a. ISSUED BY USDA FOREST SERVICE CHEROKEE NATIONAL FOREST 2800 NORTH OCOEE STREET CLEVELAND TN 37312						6. DELIVERY BY (Date) 30 Days After Notice to Proceed				
5b. FOR INFORMATION CALL: (No collect calls)						7. DELIVERY <input checked="" type="checkbox"/> FOB DESTINATION <input type="checkbox"/> OTHER (See Schedule)				
						9. DESTINATION				
						a. NAME OF CONSIGNEE USDA FOREST SERVICE				
NAME NINA BARROW			AREA CODE 423		TELEPHONE NUMBER NUMBER 476-9706		b. STREET ADDRESS CHEROKEE NATIONAL FOREST 2800 NORTH OCOEE STREET			
8. TO:						c. CITY CLEVELAND				
a. NAME			b. COMPANY			d. STATE TN				
c. STREET ADDRESS						e. ZIP CODE 37312				
d. CITY			e. STATE		f. ZIP CODE					
10. PLEASE FURNISH QUOTATIONS TO THE ISSUING OFFICE IN BLOCK 5a ON OR BEFORE CLOSE OF BUSINESS (Date) 01/03/2012 1600 ES			IMPORTANT: This is a request for information, and quotations furnished are not offers. If you are unable to quote, please so indicate on this form and return it to the address in Block 5a. This request does not commit the Government to pay any costs incurred in the preparation of the submission of this quotation or to contract for supplies or services. Supplies are of domestic origin unless otherwise indicated by quoter. Any representations and/or certifications attached to this Request for Quotations must be completed by the quoter.							
11. SCHEDULE (Include applicable Federal, State and local taxes)										
ITEM NO. (a)	SUPPLIES/SERVICES (b)				QUANTITY (c)	UNIT (d)	UNIT PRICE (e)		AMOUNT (f)	
001	Furnish and Install Replacement HVAC system at the Ocoee Ranger District Office, Polk County TN on the Cherokee National Forest (See Schedule of Items pg 2) Tax Payer ID#: _____ DUNS#: _____ Registered in CCR: _____ Yes, _____ No Registered in ORCA? _____ Yes, _____ No Replace HVAC - Ocoee Ranger District Delivery: 30 Days After Notice to Proceed									
12. DISCOUNT FOR PROMPT PAYMENT			a. 10 CALENDAR DAYS (%)		b. 20 CALENDAR DAYS (%)		c. 30 CALENDAR DAYS (%)		d. CALENDAR DAYS NUMBER PERCENTAGE	
NOTE: Additional provisions and representations <input type="checkbox"/> are <input type="checkbox"/> are not attached										
13. NAME AND ADDRESS OF QUOTER					14. SIGNATURE OF PERSON AUTHORIZED TO SIGN QUOTATION		15. DATE OF QUOTATION			
a. NAME OF QUOTER					16. SIGNER		b. TELEPHONE			
b. STREET ADDRESS							AREA CODE			
c. COUNTY										
d. CITY			e. STATE		f. ZIP CODE		c. TITLE (Type or print)		NUMBER	
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